

**UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231**

REQUEST FOR PATENT FEE REFUND															
1 Date of Request: <u>01/23/09</u>		2 Serial/Patent # <u>08/705,652</u>													
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT											
	Filing			\$											
	Amendment			\$											
	Extension of Time			\$											
	Notice of Appeal/Appeal			\$											
	Petition			\$											
	Issue			\$											
	Cert of Correction/Terminal Disc.			\$											
	Maintenance			\$											
	Assignment			\$											
<input checked="" type="checkbox"/>	Other 1599		<u>12/9/08</u>	\$ 2,820.00											
<div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <i>Credit Card</i> </div>			7 TOTAL AMOUNT OF REFUND		\$ 2,820.00										
10 REASON:			8 TO BE REFUNDED BY:												
	Overpayment	Treasury Check													
<input checked="" type="checkbox"/>	Duplicate Payment	Credit Deposit A/C #:													
	No Fee Due (Explanation):	9 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>													
Fees are paid under the patent number.															
11 REFUND REQUESTED BY:															
TYPED/PRINTED NAME: <u>Irvin Dingle</u>		TITLE: <u>Paralegal</u>													
SIGNATURE: <u><i>Irvin Dingle</i></u>		PHONE: <u>2-3210</u>													
OFFICE: <u>Petitions</u>															
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****															
APPROVED: <u><i>[Signature]</i></u>		DATE: <u>1/22/09</u>													

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

**Office of Finance
Refund Branch
Crystal Park One, Room 802B**

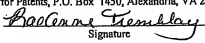
ATTORNEY'S DOCKET NUMBER: 2008646-0001

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: McElroy *et al.* Issued as: U.S. 5,835,868
Serial Number: 08/705,652 Issue date: November 10, 1998
Filed: August 30, 1996
For: AUTOMATED SYSTEM FOR IMMOBILIZING A VEHICLE AND METHOD

Mail Stop Petition
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Certificate of Mailing	
I certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Mail Stop Petition, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450	
July 22, 2008	
Date	Signature
	RaeAnne Tremblay
Typed or Printed name of person signing certificate	


TRANSMITTAL

Enclosed herewith are the following documents:

1. Petition to Accept Unintentionally Delayed Payment of Maintenance Fee Under 37 C.F.R. § 1.378 (2 pages);
2. Declaration of Alejandro S. McElroy (2 pages);
3. Declaration of Jason Rauchfuss (2 pages);
4. Credit card payment form authorizing payment in the amount of \$2,820.00 (1 page);
5. Appointment of Attorney (1 page);
6. Return Receipt Postcard (1 page); and
7. This transmittal (1 page).

If any additional fees are required to be paid or if any overpayment has been made, please charge or credit same to Deposit Account No. 03-1721.

Respectfully submitted,


C. Hunter Baker, M.D., Ph.D.
Registration Number: 46,533

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Boston, MA 02110
t (617) 248-5175
f (617) 502-5002
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Date: July 22, 2008

Adjustment date: 01/26/2009 LDI EP1
12/12/2008 SSANDARA 00000005 00705652
01 FC:1599 -2820.00 00

4354500v1

Page 1 of 1

Refund Ref: 0030865893
01/26/2009

Credit Card Refund Total: \$2820.00

VISA..... XXXXXXXXXXXX0216